

Dutchess County Youth Council Application

2003 - 2004

Name: _____ Age: _____ Birth date: _____

Address: _____

Phone: _____ School: _____ Grade: _____

Email: _____

Check One:

- ☐ Reapplying Member (Postmark by **September 20th**)
- ☐ New Applicant or Late Re-applicant (Postmark by **November 15th**)

Please answer the following questions and feel free to use another piece of paper if necessary.

1. How did you hear about the Youth Council? Why do you want to join the Youth Council?
2. List your current extra-curricular activities (i.e. school, church, work activities, and organizational affiliations) and interests.
3. Which youth issues would you want to address as a member of the Youth Council and why?
4. What would you like to get out of being a member of the Youth Council? (eg. Leadership training, a voice for youth issues, community service work, meet new people)

(over)

5. Given your active teen schedule, do you believe you will have the time to attend Youth Council once a month meetings as well as events and community service projects? (Please note that there are many different activities to participate in, and we do not expect Youth Council members to participate in every activity. However, we do expect Youth Council members to take an active role by attending the meetings on a regular basis and participating in some of the activities.)

Parental Permission

I give consent for my son/daughter, _____, to participate as a member of the Dutchess County Youth Council. I understand that transportation to and from Youth Council meetings and activities is not provided.

Parent/Guardian Signature

Date

Send to: June Ellen Notaro
Dutchess County Youth Council
27 High Street
Poughkeepsie, NY 12601
Tel.: (845) 486-3662, Fax: (845) 486-3697
Email: jnotaro@co.dutchess.ny.us

If you have any questions, please call the Youth Bureau at the above number.